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CITY OF LONG BEACH



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RECREATION DEPARTMENT

**37th ANNUAL
CITY MANAGER'S 10-MILE TROPHY RUN**

Dedicated to the memory of Ralph Kaplan

SUNDAY, MAY 26th 2013 – 8:00 A.M.



REGISTRATION:	Early Registration \$20.00 before Friday, May 24, 2013 at 4:00 p.m. Late Registration \$25.00 day of race from 6:30 a.m. – 7:30 a.m. at the Recreation Center Parking Lot (next to Recreation Center, 700 Magnolia Blvd).
	REGISTER ONLINE WWW.ACTIVE.COM
SEND ENTRIES TO:	Long Beach City Manager's Trophy Run Long Beach Recreation Department 700 Magnolia Boulevard Long Beach, NY 11561 (Payable to City of Long Beach)
COURSE:	Accurately measured 10 mi, flat & fast course (entire course will be posted on website at www.longbeachny.org/rec) Start at West Park Avenue & Magnolia Blvd & finish at Magnolia Blvd & the Bay Race timing by FINISH LINE Road Race Technicians.
AWARDS:	Awards to the first three male and female winners in each age category: 14 & Under, 15 – 19, 20 – 24, 25 – 29, 30 – 34, 35 – 39, 40 – 44, 45 – 49, 50 – 54, 55 – 59, 60 – 64, 65 – 69, 70 – 74, 75 Plus; First Overall Male and Female finishers; First Long Beach Male and Female finishers; First Physically Challenged Male and Female finishers; First Male and Female Military Veteran finishers.
T-SHIRTS:	Will be given to all registrants at number pick up on DAY OF RACE beginning at 6:30 a.m. in the Recreation Center Parking Lot, 700 Magnolia Blvd.

For information or applications call the Recreation Center (516) 431-3890 or visit longbeachny.gov/rec or lirunning.com or www.flrrt.com



www.longbeachny.org/rec

Our next race:
Sean Ryan Memorial 1K & 5K Family Fun Run.
This Schools Out, Summer Kick-Off Celebration
will take place on Saturday, June 22th at 8:00 a.m.

CITY MANAGER'S RUN 2013

PLEASE PRINT CLEARLY >> PUT TELEPHONE NUMBER ON CHECK<<

In consideration of your accepting this entry, I, the undersigned, intending to be legally bound, hereby, for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against the City of Long Beach, Long Beach Recreation Department, their representatives, successors and assigns for any and all injuries suffered by me in said event. I attest and verify that I am physically fit and sufficiently trained for the completion of this 10-MILE Run and my physical condition has been verified by a licensed medical doctor.

PRINT NAME _____ M____ F____ TELEPHONE # _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____ E-MAIL _____

AGE on 5/26 _____ D.O.B. _____ MILITARY VETERAN : YES _____ PHYSICALLY CHALLENGED : YES _____

SIGNATURE _____ PARENT SIGNATURE _____

(If under 17 years of age)

FOR RECREATION DEPT. USE ONLY

RECEIPT # _____ AMOUNT PAID _____ DATE _____ STAFF _____